#### Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 1 of 53

## Bureau of Prisons **Health Services** Clinical Encounter

VELASQUEZ, CRISTOBAL Inmate Name:

Reg #: 83734-280 Date of Birth: 01/24/1978 Sex: Race: WHITE Facility: MCR Encounter Date: 06/10/2021 12:02 Provider: Sumner, Stephanie FNP Unit: F01

Mid Level Provider - Follow up Visit encounter performed at Health Services.

SUBJECTIVE:

COMPLAINT 1 Provider: Sumner, Stephanie FNP

Chief Complaint: ENDO/LIPID

Subjective: LDL- 134, follow-up to discuss

Inmate has no complaints today

Pain: Nο

ROS:

General

**Constitutional Symptoms** 

No: Anorexia, Chills, Easily Tired, Fatigue

**OBJECTIVE:** 

Temperature:

Date **Time Fahrenheit** Celsius Location **Provider** 

06/10/2021 12:01 MCR 97.1 36.2 Sumner, Stephanie FNP

Pulse:

**Time Rate Per Minute Location Rhythm Provider Date** 

06/10/2021 12:01 Sumner, Stephanie FNP 67

**Respirations:** 

**Date** Time Rate Per Minute Provider

06/10/2021 12:01 MCR 16 Sumner, Stephanie FNP

**Blood Pressure:** 

Date Value **Location Position Cuff Size Provider** Time

06/10/2021 12:01 MCR 110/69 Sumner, Stephanie FNP

SaO2:

Provider **Date Time** Value(%) Air

12:01 MCR 98 Room Air Sumner, Stephanie FNP 06/10/2021

Weight:

Date Time Lbs Kg Waist Circum. Provider

06/10/2021 12:01 MCR 88.9 196.0 Sumner, Stephanie FNP

Exam:

**Diagnostics** 

Laboratory

Yes: Results

General

**Appearance** 

Yes: Appears Well, Alert and Oriented x 3

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Inmate Name: VELASQUEZ, CRISTOBAL

Date of Birth: 01/24/1978

Encounter Date: 06/10/2021 12:02

Reg #: 83734-280

Sex: M Race: WHITE Facility: MCR

Provider: Sumner, Stephanie FNP Unit: F01

Skin

General

Yes: Within Normal Limits, Dry, Skin Intact

**Pulmonary** 

Observation/Inspection

Yes: Within Normal Limits

Cardiovascular
Observation

Yes: Within Normal Limits

### **Exam Comments**

Discussed with inmate the effects of high cholesterol. We discussed the importance of diet and exercise. To limit the amount of fried foods, chips, cakes and cookies. To eat more fruits and vegetables. Instructed on Cardio exercise at least 30 minutes everyday. Encouraged weight loss.

### **ASSESSMENT:**

Abnormal finding of blood chemistry, unspecified, R799 - Current - LDL-134

### PLAN:

### **New Laboratory Requests:**

DetailsFrequencyDue DatePriorityLab Tests - Short List-General-CBC w/diffOne Time12/10/2021 00:00Routine

Lab Tests - Short List-General-Lipid Profile Lab Tests - Short List-General-Hemoglobin A1C Lab Tests - Short List-General-Comprehensive

Metabolic Profile (CMP)

Labs requested to be reviewed by: Cunnagin, Carrie DO

Disposition:

Follow-up at Sick Call as Needed

#### **Patient Education Topics:**

Date Initiated<br/>06/10/2021FormatHandout/TopicProviderOutcome06/10/2021CounselingAccess to CareSumner, StephanieVerbalizes<br/>Understanding

06/10/2021 Counseling Plan of Care Sumner, Stephanie Verbalizes

Understanding

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Sumner, Stephanie FNP on 06/10/2021 12:05

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# Bureau of Prisons Health Services Clinical Encounter - Administrative Note

Inmate Name: VELASQUEZ, CRISTOBAL Reg #: 83734-280

Date of Birth: 01/24/1978 Sex: M Race: WHITE Facility: MCR Note Date: 05/12/2021 11:12 Provider: Sumner, Stephanie FNP Unit: F01

Review Note - Report Review encounter performed at Health Services.

**Administrative Notes:** 

ADMINISTRATIVE NOTE 1 Provider: Sumner, Stephanie FNP

LDL-Cholesterol H 134, will schedule follow-up to discuss

Schedule:

Activity <u>Date Scheduled Scheduled Provider</u>

Follow-up 05/19/2021 00:00 MLP 02

LDL-Cholesterol H 134

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Sumner, Stephanie FNP on 05/12/2021 11:24

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# Bureau of Prisons Health Services Clinical Encounter - Administrative Note

Inmate Name: VELASQUEZ, CRISTOBAL Reg #: 83734-280

Date of Birth: 01/24/1978 Sex: M Race: WHITE Facility: MCR Note Date: 03/16/2021 15:27 Provider: Sumner, Stephanie FNP Unit: F01

Review Note - Report Review encounter performed at Health Services.

**Administrative Notes:** 

ADMINISTRATIVE NOTE 1 Provider: Sumner, Stephanie FNP

Sample for the test listed below was received uncentrifuged/partially centrifuged and has been rejected.

Comprehensive Metabolic Profile

Providers: Please review and re-order if clinically indicated.

**New Laboratory Requests:** 

DetailsFrequencyDue DatePriorityLab Tests - Short List-General-ComprehensiveOne Time03/23/2021 00:00Routine

Metabolic Profile (CMP)

Additional Information:

Sample for the test listed below was received uncentrifuged/partially

centrifuged and has been rejected. Comprehensive Metabolic Profile

Providers: Please review and re-order if clinically indicated.

Labs requested to be reviewed by: Cunnagin, Carrie DO

Copay Required: No Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Sumner, Stephanie FNP on 03/16/2021 15:28

Requested to be cosigned by Cunnagin, Carrie DO.

Cosign documentation will be displayed on the following page.

# Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 5 of 53 **Bureau of Prisons**

Bureau of Prisons Health Services Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL
Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 03/16/2021 15:27 Provider: Sumner, Stephanie FNP Facility: MCR

Cosigned by Cunnagin, Carrie DO on 03/17/2021 08:15.

### Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 6 of 53

# Bureau of Prisons Health Services Clinical Encounter - Administrative Note

Inmate Name: VELASQUEZ, CRISTOBAL 83734-280 Reg #: Date of Birth: 01/24/1978 Race: WHITE Facility: Sex: Μ MCR Note Date: 03/16/2021 15:25 Provider: Sumner, Stephanie FNP Unit: F01

Review Note - Report Review encounter performed at Health Services.

**Administrative Notes:** 

ADMINISTRATIVE NOTE 1 Provider: Sumner, Stephanie FNP

Sample for the test listed below was received uncentrifuged/partially centrifuged and has been rejected.

Lipid Profile, TSH

Providers: Please review and re-order if clinically indicated.

**New Laboratory Requests:** 

DetailsFrequencyDue DatePriorityLab Tests - Short List-General-Lipid ProfileOne Time03/23/2021 00:00Routine

Lab Tests - Short List-General-TSH

Additional Information:

Sample for the test listed below was received uncentrifuged/partially

centrifuged and has been rejected.

Lipid Profile, TSH

Providers: Please review and re-order if clinically indicated.

Labs requested to be reviewed by: Cunnagin, Carrie DO

Copay Required: No Cosign Required: Yes

Telephone/Verbal Order: No

Completed by Sumner, Stephanie FNP on 03/16/2021 15:25

Requested to be cosigned by Cunnagin, Carrie DO.

Cosign documentation will be displayed on the following page.

# Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 7 of 53 **Bureau of Prisons**

Bureau of Prisons Health Services Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL
Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 03/16/2021 15:25 Provider: Sumner, Stephanie FNP Facility: MCR

Cosigned by Cunnagin, Carrie DO on 03/17/2021 08:15.

#### Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 8 of 53

## Bureau of Prisons **Health Services** Clinical Encounter

Reg #:

83734-280

Inmate Name: VELASQUEZ, CRISTOBAL

Date of Birth: 01/24/1978

Facility: Sex: Race: WHITE MCR Encounter Date: 02/18/2021 14:58 Provider: Cunnagin, Carrie DO Unit: F01

Chronic Care - Chronic Care Clinic encounter performed at Housing Unit.

SUBJECTIVE:

COMPLAINT 1 Provider: Cunnagin, Carrie DO

Chief Complaint: Chronic Care Clinic

Subjective: + ID CCC for: HCV+. Diagnosed in 2016.

> s/p treatment with mavyret 4/1-5/27/2020. Last HCV VL was none detected in 10/2020.

He has no c/o's.

Pain: No

Seen for clinic(s): Infectious Disease

Removed from clinic(s): Infectious Disease

**OBJECTIVE:** 

**Temperature:** 

Time <u>Fahrenheit</u> **Celsius** Location **Provider** Date

14:59 MCR 02/18/2021 97.4 36.3 Cunnagin, Carrie DO

Pulse:

Date Time **Rate Per Minute Location Rhythm Provider** 

02/18/2021 14:59 76 Cunnagin, Carrie DO

**Respirations:** 

**Date** Time Rate Per Minute Provider

02/18/2021 14:59 MCR 15 Cunnagin, Carrie DO

**Blood Pressure:** 

**Cuff Size Date** Time Value **Location Position Provider** 

02/18/2021 14:59 MCR 105/71 Cunnagin, Carrie DO

SaO2:

**Date Time** Value(%) Air **Provider** 

97 Room Air 02/18/2021 14:59 MCR Cunnagin, Carrie DO

Height:

Date Time Inches Cm Provider

02/18/2021 14:59 MCR 65.0 165.1 Cunnagin, Carrie DO

Weight:

Date Time Lbs Kg Waist Circum. Provider

02/18/2021 14:59 MCR 188.0 85.3 Cunnagin, Carrie DO

**ROS Comments** 

No n/v/d/c.

No f/c/night sweats/cough.

Wt down 7 lbs over the past yr.

No cp/sob/syncope.

No melena/hematochezia.

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Inmate Name: VELASQUEZ, CRISTOBAL Reg #: 83734-280

Date of Birth: Facility: MCR 01/24/1978 Sex: Μ Race: WHITE Encounter Date: 02/18/2021 14:58 Provider: Cunnagin, Carrie DO Unit: F01

### PHYSICAL EXAM:

Gen-A&O, NAD Neck-supple H-RRR

L-CTA

A-soft, NT, no palpable masses, no HSM

LE's without edema.

Gait-normal

### ASSESSMENT:

Chronic viral hepatitis C, B182 - Resolved

Prediabetes, R7303 - Current - 4/2019 A1C=6.1 THEN, A1C = 5.8 in 2/2020.

#### PLAN:

### **New Laboratory Requests:**

**Details Due Date Frequency Priority** Lab Tests - Short List-General-Lipid Profile One Time 03/04/2021 00:00 Routine

Lab Tests - Short List-General-TSH

Lab Tests - Short List-General-Hemoglobin A1C

Additional Information:

please add these labs to his existing HCV labwork previously ordered. Labs requested to be reviewed by: Sumner, Stephanie FNP

### Schedule:

**Activity Date Scheduled Scheduled Provider** 

Preventive Health Visit 02/18/2022 00:00 Nurse

Disposition:

Follow-up at Sick Call as Needed

#### Other:

CL1.

DC ID CCC at this time. HCV successfully treated.

Labwork ordered.

### **Patient Education Topics:**

Date Initiated Format Handout/Topic **Provider** Outcome 02/18/2021 Plan of Care Cunnagin, Carrie Verbalizes Counseling

02/18/2021 Counseling Exercise Cunnagin, Carrie Verbalizes

Understanding

Understanding

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Cunnagin, Carrie DO on 02/18/2021 15:09

#### 

# Bureau of Prisons Health Services Clinical Encounter

Inmate Name: VELASQUEZ, CRISTOBAL

Date of Birth: 01/24/1978

Encounter Date: 01/21/2021 13:27

Sex: M Race: WHITE Provider: Sumner, Stephanie FNP

Facility: MCR Unit: F01

Reg #:

83734-280

Mid Level Provider - Follow up Visit encounter performed at Health Services.

SUBJECTIVE:

COMPLAINT 1 Provider: Sumner, Stephanie FNP

Chief Complaint: HEPATITIS C

Subjective: 6-12 month HCV follow-up. Inmate reports that he is doing well and has no complaints today

Pain: No

ROS:

General

**Constitutional Symptoms** 

No: Anorexia, Chills, Easily Tired, Fatigue, Fever

**OBJECTIVE:** 

Temperature:

<u>Date Time Fahrenheit Celsius Location Provider</u>

01/21/2021 13:28 MCR 96.7 35.9 Sumner, Stephanie FNP

Pulse:

<u>Date Time Rate Per Minute Location Rhythm Provider</u>

01/21/2021 13:28 77 Sumner, Stephanie FNP

**Respirations:** 

Date Time Rate Per Minute Provider

01/21/2021 13:28 MCR 16 Sumner, Stephanie FNP

**Blood Pressure:** 

<u>Date Time Value Location Position Cuff Size Provider</u>

01/21/2021 13:28 MCR 127/67 Sumner, Stephanie FNP

SaO2:

Date Time Value(%) Air Provider

01/21/2021 13:28 MCR 99 Room Air Sumner, Stephanie FNP

Weight:

<u>Date Time Lbs Kg Waist Circum. Provider</u>

01/21/2021 13:28 MCR 188.0 85.3 Sumner, Stephanie FNP

Exam:

General

**Appearance** 

Yes: Appears Well, Alert and Oriented x 3

Skin

General

Yes: Within Normal Limits, Dry, Skin Intact

**Pulmonary** 

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VELASQUEZ, CRISTOBAL Inmate Name: Reg #: 83734-280 Date of Birth: 01/24/1978 Sex: Race: WHITE Facility: MCR Μ Encounter Date: 01/21/2021 13:27 Unit: Provider: Sumner, Stephanie FNP F01

Observation/Inspection

Yes: Within Normal Limits

Cardiovascular Observation

Yes: Within Normal Limits

**ASSESSMENT:** 

Chronic viral hepatitis C, B182 - Current

PLAN:

Disposition:

Follow-up at Sick Call as Needed

**Patient Education Topics:** 

Date Initiated Format Handout/Topic <u>Provider</u> <u>Outcome</u> 01/21/2021 Counseling Access to Care Sumner, Stephanie Verbalizes

Understanding

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Sumner, Stephanie FNP on 01/21/2021 13:30

#### 

## Bureau of Prisons Health Services

### Vitals All

Begin Date: 10/05/2020 End Date: 10/05/2021

Reg #: 83734-280 Inmate Name: VELASQUEZ, CRISTOBAL

Temperature:

<u>Date Time Fahrenheit Celsius Location Provider</u>

06/10/2021 12:01 MCR 97.1 36.2 Sumner, Stephanie FNP

Orig Entered: 06/10/2021 12:03 EST Sumner, Stephanie FNP

02/18/2021 14:59 MCR 97.4 36.3 Cunnagin, Carrie (MAT) DO

Orig Entered: 02/18/2021 15:01 EST Cunnagin, Carrie (MAT) DO

01/21/2021 13:28 MCR 96.7 35.9 Sumner, Stephanie FNP

Orig Entered: 01/21/2021 13:29 EST Sumner, Stephanie FNP

Pulse:

<u>Date Time Rate Per Minute Location Rhythm Provider</u>

06/10/2021 12:01 67 Sumner, Stephanie FNP

Orig Entered: 06/10/2021 12:03 EST Sumner, Stephanie FNP

02/18/2021 14:59 76 Cunnagin, Carrie (MAT) DO

Orig Entered: 02/18/2021 15:01 EST Cunnagin, Carrie (MAT) DO

01/21/2021 13:28 77 Sumner, Stephanie FNP

Orig Entered: 01/21/2021 13:29 EST Sumner, Stephanie FNP

**Respirations:** 

06/10/2021 12:01 MCR 16 Sumner, Stephanie FNP

Orig Entered: 06/10/2021 12:03 EST Sumner, Stephanie FNP

02/18/2021 14:59 MCR 15 Cunnagin, Carrie (MAT) DO

Orig Entered: 02/18/2021 15:01 EST Cunnagin, Carrie (MAT) DO

01/21/2021 13:28 MCR 16 Sumner, Stephanie FNP

Orig Entered: 01/21/2021 13:29 EST Sumner, Stephanie FNP

**Blood Pressure:** 

<u>Date Time Value Location Position Cuff Size Provider</u>

06/10/2021 12:01 MCR 110/69 Sumner, Stephanie FNP

Orig Entered: 06/10/2021 12:03 EST Sumner, Stephanie FNP

02/18/2021 14:59 MCR 105/71 Cunnagin, Carrie (MAT) DO

Orig Entered: 02/18/2021 15:01 EST Cunnagin, Carrie (MAT) DO

01/21/2021 13:28 MCR 127/67 Sumner, Stephanie FNP

Orig Entered: 01/21/2021 13:29 EST Sumner, Stephanie FNP

SaO2:

<u>Date Time Value(%) Air Provider</u>

06/10/2021 12:01 MCR 98 Room Air Sumner, Stephanie FNP

Orig Entered: 06/10/2021 12:03 EST Sumner, Stephanie FNP

02/18/2021 14:59 MCR 97 Room Air Cunnagin, Carrie (MAT) DO

Orig Entered: 02/18/2021 15:01 EST Cunnagin, Carrie (MAT) DO

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Begin Date: 10/05/2020 End Date: 10/05/2021

Reg #: 83734-280 Inmate Name: VELASQUEZ, CRISTOBAL

<u>Date Time Value(%) Air Provider</u>

01/21/2021 13:28 MCR 99 Room Air Sumner, Stephanie FNP

Orig Entered: 01/21/2021 13:29 EST Sumner, Stephanie FNP

Height:

<u>Date Time Inches Cm Provider</u>

02/18/2021 14:59 MCR 65.0 165.1 Cunnagin, Carrie (MAT) DO

Orig Entered: 02/18/2021 15:01 EST Cunnagin, Carrie (MAT) DO

Weight:

<u>Date</u> <u>Time</u> <u>Lbs</u> <u>Kg</u> <u>Waist Circum.</u> <u>Provider</u>

06/10/2021 12:01 MCR 196.0 88.9 Sumner, Stephanie FNP

Orig Entered: 06/10/2021 12:03 EST Sumner, Stephanie FNP

02/18/2021 14:59 MCR 188.0 85.3 Cunnagin, Carrie (MAT) DO

Orig Entered: 02/18/2021 15:01 EST Cunnagin, Carrie (MAT) DO

01/21/2021 13:28 MCR 188.0 85.3 Sumner, Stephanie FNP

Orig Entered: 01/21/2021 13:29 EST Sumner, Stephanie FNP

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# Bureau of Prisons Health Services PPDs

| Reg #: 83734-280 Inmate Name: VELASQUEZ, CRISTOBAL |                      |                     |                               |                           |  |  |
|--|----------------------|---------------------|-------------------------------|---------------------------|--|--|
| Admin:   | Location             | <u>Provider</u>     | Reading: Induration           | n <u>Provider</u>         |  |  |
| 01/05/2022 08:33                                   | Right Forearm        | Morrow, Adam RN/HSS | 01/07/2022 07:39 0 mm         | Lawson, Autumn RN         |  |  |
| Orig Entered:                                      | 01/05/2022 08:34 EST | Morrow, Adam RN/HSS | Orig Entered: 01/07/2022 07:3 | 9 EST Lawson, Autumn RN   |  |  |
| 01/06/2021 15:05                                   | Left Forearm         | Morrow, Adam RN/HSS | 01/09/2021 10:09 0 mm         | Privett, H. RN            |  |  |
| Orig Entered:                                      | 01/06/2021 15:06 EST | Morrow, Adam RN/HSS | Orig Entered: 01/09/2021 10:0 | 9 EST Privett, H. RN      |  |  |
| 01/13/2020 13:44                                   | Left Forearm         | Morrow, Adam RN/HSS | 01/16/2020 11:57 0 mm         | Morrow, Adam RN/HSS       |  |  |
| Orig Entered:                                      | 01/13/2020 13:45 EST | Morrow, Adam RN/HSS | Orig Entered: 01/16/2020 11:5 | 7 EST Morrow, Adam RN/HSS |  |  |
| 01/29/2019 08:21                                   | Left Forearm         | Stephens, Neil RN   | 01/31/2019 08:06 0 mm         | Stephens, Neil RN         |  |  |
| Orig Entered:                                      | 01/29/2019 08:22 EST | Stephens, Neil RN   | Orig Entered: 01/31/2019 08:0 | 6 EST Stephens, Neil RN   |  |  |
| 02/05/2018 11:49                                   | Left Forearm         | Stephens, Neil RN   | 02/07/2018 10:01 0 mm         | Stephens, Neil RN         |  |  |
| Orig Entered:                                      | 02/05/2018 11:50 EST | Stephens, Neil RN   | Orig Entered: 02/07/2018 10:0 | 1 EST Stephens, Neil RN   |  |  |
| 02/21/2017 08:20                                   | Left Forearm         | Phillips, Aimee RN  | 02/23/2017 07:46 0 mm         | Phillips, Aimee RN        |  |  |
| Orig Entered:                                      | 02/21/2017 08:21 EST | Phillips, Aimee RN  | Orig Entered: 02/23/2017 07:4 | 7 EST Phillips, Aimee RN  |  |  |
| 02/05/2016 17:22                                   | Left Forearm         | Morrow, Adam RN/HSS | 02/07/2016 12:24 0 mm         | Lawson, Autumn RN         |  |  |
| Orig Entered:                                      | 02/05/2016 17:27 EST | Morrow, Adam RN/HSS | Orig Entered: 02/07/2016 12:2 | 4 EST Lawson, Autumn RN   |  |  |

Total: 7

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# **Health Services**

**Allergies** 

Inmate Name: VELASQUEZ, CRISTOBAL Reg #: 83734-280

**Allergy Date Noted Reaction** 

No Known Allergies 01/26/2016

Orig Entered: 01/26/2016 14:28 EST Upchurch, Adele DDS

Total: 1

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## Bureau of Prisons Health Services

### **Patient Education Assessments & Topics**

Reg #: 83734-280 Inmate Name: VELASQUEZ, CRISTOBAL

Handout/Tonic

Format

### **Assessments**

Assessment Date Learns Best By Primary Language Years of Education Barriers To Education Provider

Total: 0

Date Initiated

## **Topics**

Outcome

| <u>Date illitiated</u> <u>Form</u> | <u>rianuot</u>       | uv i opic              | Outcome                  | <u>FTOVIGET</u>   |
|------------------------------------|----------------------|------------------------|--------------------------|-------------------|
| 06/10/2021 Cour                    | nseling Access       | to Care                | Verbalizes Understanding | Sumner, Stephanie |
| Orig Entered:                      | 06/10/2021 12:05 EST | Sumner, Stephanie      |                          |                   |
| 06/10/2021 Cour                    | nseling Plan of      | Care                   | Verbalizes Understanding | Sumner, Stephanie |
| Orig Entered:                      | 06/10/2021 12:05 EST | Sumner, Stephanie      |                          |                   |
| 02/18/2021 Cour                    | nseling Plan of      | Care                   | Verbalizes Understanding | Cunnagin, Carrie  |
| Orig Entered:                      | 02/18/2021 15:05 EST | Cunnagin, Carrie (MAT) |                          |                   |
| 02/18/2021 Cour                    | nseling Exercis      | se                     | Verbalizes Understanding | Cunnagin, Carrie  |
| Orig Entered:                      | 02/18/2021 15:05 EST | Cunnagin, Carrie (MAT) |                          |                   |
| 01/21/2021 Cour                    | nseling Access       | to Care                | Verbalizes Understanding | Sumner, Stephanie |
| Orig Entered:                      | 01/21/2021 13:30 EST | Sumner, Stephanie      |                          |                   |

Total: 5

Provider

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# Bureau of Prisons Health Services Health Problems

| Reg #: 83734-280 Inmate Name: VELASQUEZ,   | CRISTOBAL   |           |             |                     |             |
|--|-------------|-----------|-------------|---------------------|-------------|
| <u>Description</u>   | <u>Axis</u> | Code Type | <u>Code</u> | Diag. Date Status   | Status Date |
|  | Current     |           |             |                     |             |
| Pain in unspecified foot   |             |           |             |                     |             |
| 09/18/2017 11:53 EST West, Jennifer APRN   |             | ICD-10    | M79673      | 09/18/2017 Current  |             |
| Prediabetes  |             |           |             |                     |             |
| 02/18/2021 15:09 EST Cunnagin, Carrie DO<br>4/2019 A1C=6.1 THEN, A1C = 5.8 in 2/2020.          |             | ICD-10    | R7303       | 03/19/2019 Current  |             |
| 02/20/2020 08:18 EST Cunnagin, Carrie DO<br>4/2019 A1C=6.1                                     |             | ICD-10    | R7303       | 03/19/2019 Current  |             |
| 03/19/2019 09:10 EST Cunnagin, Carrie DO<br>10/2018 A1C=5.9                                    |             | ICD-10    | R7303       | 03/19/2019 Current  |             |
| Abnormal finding of blood chemistry, unspecified   |             |           |             |                     |             |
| 06/10/2021 12:04 EST Sumner, Stephanie FNP<br>LDL-134  |             | ICD-10    | R799        | 06/10/2021 Current  |             |
| 1  | Resolved    |           |             |                     |             |
| Periapical abscess without sinus   |             |           |             |                     |             |
| 02/23/2016 07:20 EST SYSTEM  | III         | ICD-9     | 522.5       | 01/26/2016 Resolved | 01/26/2016  |
| mild buccal space abscess secondary to gross decay #4 01/26/2016 15:39 EST Upchurch, Adele DDS | 111         | ICD-9     | 522.5       | 01/26/2016 Resolved | 01/26/2016  |
| mild buccal space abscess secondary to gross decay #4  |             | 100 3     | 022.0       | 01/20/2010 NC30IVCd | 01/20/2010  |
| 01/26/2016 14:26 EST Upchurch, Adele DDS mild buccal space abscess secondary to gross decay #4 | III         | ICD-9     | 522.5       | 01/26/2016 Current  | 01/26/2016  |
| Chronic viral hepatitis C  |             |           |             |                     |             |
| 02/18/2021 15:03 EST Cunnagin, Carrie DO<br>Genotype 1a  |             | ICD-10    | B182        | 11/29/2016 Resolved | 02/18/2021  |
| 02/21/2017 15:43 EST Dankwa, Vibeke MD<br>Genotype 1a  |             | ICD-10    | B182        | 11/29/2016 Current  |             |
| 11/29/2016 13:58 EST Dyer, Mitchell PA-C   |             | ICD-10    | B182        | 11/29/2016 Current  |             |
| Confirmed case COVID-19  |             |           |             |                     |             |
| 08/16/2021 11:47 EST Morrow, Adam RN/HSS   |             | ICD-10    | U07.1       | 08/04/2021 Resolved | 08/16/2021  |
| 08/04/2021 12:38 EST Kenney, Pamela FNP  |             | ICD-10    | U07.1       | 08/04/2021 Current  |             |

Total: 6

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# Bureau of Prisons Health Services

## Vision Screens

Reg #: 83734-280 Inmate Name: VELASQUEZ, CRISTOBAL

Vision Screen on 02/09/2016 12:41

Blindness:

**Distance Vision:** OD: 20/30 OS: 20/30 OU: 20/30

Near Vision: OD: OS: OU:

With Corrective

Distance Vision:OD:OS:OU:Near Vision:OD:OS:OU:

Present Glasses - Distance Refraction - Distance

Sphere Cylinder Axis Add Sphere Cylinder Axis Add

R: R: L: L:

Color Test: Normal

Tonometry: R: L:

**Comments:** 

Orig Entered: 02/09/2016 12:42 EST West, Jennifer APRN

# Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 20 of 53 Bureau of Prisons

## Bureau of Prisons Health Services

## **COVID-19 AG**

Begin Date: 10/05/2020 End Date: 10/05/2021

Reg #: 83734-280 Inmate Name: VELASQUEZ, CRISTOBAL

(Reference Range - Negative)

Effective Date COVID-19 AG Provider

08/04/2021 13:11 MCR Positive Asymptomatic Morrow, Adam RN/HSS

Orig Entered: 08/04/2021 13:12 EST Morrow, Adam RN/HSS

Total: 1

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# Bureau of Prisons Health Services Immunizations

Begin Date: 10/05/2020 End Date: 10/05/2021

Reg #: 83734-280 Inmate Name: VELASQUEZ, CRISTOBAL

| Immunization<br>COVID-19 Pfizer-BioNTech               | Immunization Date<br>04/05/2021     | Administered<br>Now    | Location<br>Left Deltoid | Dosage<br>0.3mL | <b>Drug Mfg.</b><br>Pfizer | <u>Lot #</u><br>EW0158 | <b>Dose #</b> 2 | Exp Date<br>07/31/2021 |
|--|-------------------------------------|------------------------|--------------------------|-----------------|----------------------------|------------------------|-----------------|------------------------|
| Orig Entered: 04/<br>COVID-19 Pfizer-BioNTech          | 06/2021 10:18 EST Moi<br>03/15/2021 | row, Adam RN/HS<br>Now | SS<br>Left Deltoid       | 0.3mL           | Pfizer                     | ER8727                 | 1               | 07/31/2021             |
| Orig Entered: 03/16/2021 14:00 EST Morrow, Adam RN/HSS |                                     |                        |                          |                 |                            |                        |                 |                        |
| Influenza - Immunization                               | 10/16/2020                          | Now                    | Left Deltoid             | 0.5mL           | GSK                        | B7473                  |                 | 06/30/2021             |

Fluarix Quadrivalent--2020-2021 flu season

Orig Entered: 10/16/2020 12:30 EST Morrow, Adam RN/HSS

Total: 3

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## **Health Services**

### **Medical Duty Status**

| Reg #: 83734-280 Inmate Name: VELASQUEZ, CRISTOBAL                        |                |
|---|----------------|
| Housing Status  |                |
| confined to the living quarters exceptmealspill linetreatments            | Exp. Date:     |
| on complete bed rest:bathroom privileges only                             | Exp. Date:     |
| cell:cell on first floorsingle celllower bunkairborne infection isolation | Exp. Date:     |
| other:  | Exp. Date:     |
| Physical Limitation/Restriction   |                |
| all sports  | Exp. Date:     |
| weightlifting:upper bodylower body  | Exp. Date:     |
| cardiovascular exercise:runningjoggingwalkingsoftball                     | Exp. Date:     |
| footballbasketballhandballstationary equipment                            | ) <b>Y</b>     |
| other:  | Exp. Date:     |
| May have the following equipment in his / her possession:                 |                |
|   |                |
| Work Restriction / Limitation:  |                |
| Cleared for Food Service: Yes   |                |
| X No Restrictions   |                |
| Comments: Medical Care Level 1.   |                |
| Cunnagin, Carrie (MAT) DO   | 02/18/2021     |
| Health Services Staff   | Date           |
| Inmate Name: VELASQUEZ, CRISTOBAL Reg #: 83734-280 Quarte                 | rs: <b>F01</b> |

**ALL EXPIRATION DATES ARE AT 24:00** 



## **FMC Butner**

1000 Old Highway NC 75 Butner, NC 27509 919-575-3900 x5707

\*\*\* Sensitive But Unclassified \*\*\*

 Name
 VELASQUEZ, CRISTOBAL
 Facility
 USP McCreary
 Collected 05/10/2021 11:05

 Reg # 83734-280
 Order Unit F01-109L
 Received 05/11/2021 12:07

 DOB 01/24/1978
 Provider
 Stephanie Sumner, NP
 Reported 05/11/2021 13:58

 Sex
 M
 LIS ID 075213275

|                    |   | CHEMISTRY         |         |       |
|--------------------|---|-------------------|---------|-------|
| Cholesterol, Total |   | 190               | <200    | mg/dL |
| Triglycerides      |   | 68                | <150    | mg/dL |
| HDL Cholesterol    |   | 43                | 40-60   | mg/dL |
| LDL-Cholesterol    | Н | 134               | <130    | mg/dL |
| Chol/HDLC Ratio    | Н | 4.4               | 0.0-4.0 |       |
|                    |   |                   |         |       |
|                    |   | SPECIAL CHEMISTRY |         |       |

|     | SPECIAL CHEMISTRY |             |        |
|-----|-------------------|-------------|--------|
| TSH | 1.995             | 0.350-4.940 | uIU/mL |

FLAG LEGEND L=Low L!=Low Critical H=High H!=High Critical A=Abnormal A! =Abnormal Critical

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## Bureau of Prisons Health Services Cosign/Review

Inmate Name:VELASQUEZ, CRISTOBALReg #:83734-280Date of Birth:01/24/1978Sex:MRace:WHITEEncounter Date:05/11/2021 14:18Provider:Lab Result ReceiveFacility:MCR

Reviewed with New Encounter Note by Sumner, Stephanie FNP on 05/12/2021 11:12.

### 

# Bureau of Prisons Health Services Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL
Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 05/11/2021 14:18 Provider: Lab Result Receive Facility: MCR

Cosigned by Dankwa, Vibeke (MAT) MD on 05/21/2021 15:11.



## **FMC Butner**

1000 Old Highway NC 75 Butner, NC 27509 919-575-3900 x5707

\*\*\* Sensitive But Unclassified \*\*\*

Name VELASQUEZ, CRISTOBAL Reg # 83734-280 DOB 01/24/1978 Facility USP McCreary
Order Unit F01-109L
Provider Stephanie Sumner, NP

Collected 05/10/2021 11:04 Received 05/11/2021 12:06 Reported 05/11/2021 13:56

**Sex** M **LIS ID** 075213293

|   |  | CHEMISTRY                        |                                 |                |
|---|--|----------------------------------|---------------------------------|----------------|
| Sodium  |  | 140                              | 136-145                         | mmol/L         |
| Potassium   |  | 4.0                              | 3.5-5.1                         | mmol/L         |
| Chloride  |  | 107                              | 98-107                          | mmol/L         |
| Carbon Dioxide  |  | 25                               | 21-32                           | mmol/L         |
| Urea Nitrogen (BUN)                                   |  | 20                               | 7-26                            | mg/dL          |
| Creatinine  |  | 0.89                             | 0.60-1.30                       | mg/dL          |
| eGFR (IDMS)   |  | >60                              |                                 |                |
| GFR units measured as ml kidney disease if found over | _/min/1.73 m^2. if A<br>er a 3 month period. | African American, multiply by 1. | .210. A calculated GFR <60 sugg | ests a chronic |
| Calcium   | L  | 8.3                              | 8.4-10.2                        | mg/dL          |
| Glucose   |  | 98                               | 70-109                          | mg/dL          |
| AST   |  | 16                               | 5-34                            | U/L            |
| ALT   |  | 13                               | 8-55                            | U/L            |
| Alkaline Phosphatase                                  |  | 56                               | 40-140                          | U/L            |
| Bilirubin, Total                                      |  | 0.5                              | 0.2-1.0                         | mg/dL          |
| Protein, Total  |  | 6.8                              | 6.4-8.3                         | g/dL           |
| Albumin   |  | 4.0                              | 3.5-5.0                         | g/dL           |
| Globulin  |  | 2.8                              |                                 | g/dL           |
| Alb/Globulin Ratio                                    |  | 1.43                             | 1.00-2.30                       |                |
| Anion Gap   | L  | 8.0                              | 9.0-19.0                        |                |
| BUN/Creatinine Ratio                                  |  | 21.9                             | 5.0-30.0                        |                |

### 

# Bureau of Prisons Health Services Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL

Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 05/11/2021 14:03 Provider: Lab Result Receive Facility: MCR

Reviewed by Sumner, Stephanie FNP on 05/12/2021 11:11.

### 

Bureau of Prisons
Health Services
Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL

Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 05/11/2021 14:03 Provider: Lab Result Receive Facility: MCR

Cosigned by Cunnagin, Carrie DO on 06/09/2021 10:07.



### **FMC Butner**

1000 Old Highway NC 75 Butner, NC 27509 919-575-3900 x5707

\*\*\* Sensitive But Unclassified \*\*\*

Name VELASQUEZ, CRISTOBAL

**Reg #** 83734-280 **DOB** 01/24/1978

Sex M

**Facility** USP McCreary **Order Unit** F01-109L

Provider Stephanie Sumner, NP

Collected 03/15/2021 11:26,

03/16/2021 13:21

Received

**Reported** 03/16/2021 13:21

**LIS ID** 091201601

### **REFUSAL / REJECT / CANCEL**

Sample for the test listed below was received uncentrifuged/partially centrifuged and has been rejected.

Comprehensive Metabolic Profile

Providers: Please review and re-order if clinically indicated.

Complete

# Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 30 of 53 Bureau of Prisons

## Bureau of Prisons Health Services Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL
Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 03/16/2021 13:21 Provider: Lab Result Receive Facility: MCR

Reviewed with New Encounter Note by Sumner, Stephanie FNP on 03/16/2021 15:27.

# Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 31 of 53 **Bureau of Prisons**

Bureau of Prisons
Health Services
Cosign/Review

Inmate Name:VELASQUEZ, CRISTOBALReg #:83734-280Date of Birth:01/24/1978Sex:MRace:WHITEEncounter Date:03/16/2021 13:21Provider:Lab Result ReceiveFacility:MCR

Cosigned by Cunnagin, Carrie DO on 03/17/2021 08:15.



### **FMC Butner**

1000 Old Highway NC 75 Butner, NC 27509 919-575-3900 x5707

\*\*\* Sensitive But Unclassified \*\*\*

Name VELASQUEZ, CRISTOBAL

**Reg #** 83734-280

**DOB** 01/24/1978 **Sex** M

**Facility** USP McCreary **Order Unit** F01-109L

Provider Carrie Cunnagin, DO

Collected 03/15/2021 11:26,

03/16/2021 13:19

Received

**Reported** 03/16/2021 13:19

**LIS ID** 049212871

### **REFUSAL / REJECT / CANCEL**

Sample for the test listed below was received uncentrifuged/partially centrifuged and has been rejected.

Lipid Profile, TSH

Providers: Please review and re-order if clinically indicated.

Complete

### 

# Bureau of Prisons Health Services Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL
Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 03/16/2021 13:19 Provider: Lab Result Receive Facility: MCR

Reviewed with New Encounter Note by Sumner, Stephanie FNP on 03/16/2021 15:24.

### 

Bureau of Prisons
Health Services
Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL
Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 03/16/2021 13:19 Provider: Lab Result Receive Facility: MCR

Cosigned by Cunnagin, Carrie DO on 03/17/2021 08:15.



### **FMC Butner**

1000 Old Highway NC 75 Butner, NC 27509 919-575-3900 x5707

\*\*\* Sensitive But Unclassified \*\*\*

Name VELASQUEZ, CRISTOBAL

**Reg #** 83734-280 **DOB** 01/24/1978

Sex M

**Facility** USP McCreary **Order Unit** F01-109L

Provider Carrie Cunnagin, DO

Collected 03/15/2021 11:26,

03/16/2021 13:19

**Received** 03/16/2021 12:38 **Reported** 03/17/2021 11:08 **LIS ID** 049212871

### **HEMOGLOBIN A1C**

Hemoglobin A1C

5.7 - 6.4 Increased Risk > 6.4 Diabetes

5.6 4.0-5.7 %

# Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 36 of 53 **Bureau of Prisons**

Bureau of Prisons
Health Services
Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL
Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 03/17/2021 11:12 Provider: Lab Result Receive Facility: MCR

Reviewed by Sumner, Stephanie FNP on 03/17/2021 11:43.

### 

# Bureau of Prisons Health Services Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL
Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 03/17/2021 11:12 Provider: Lab Result Receive Facility: MCR

Cosigned by Cunnagin, Carrie DO on 03/17/2021 12:56.



### Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 38 of 53 Report Status: Final

### VELASQUEZ, CRISTOPBAL

| Patient Information   | Specimen Information  | Client Information  |  |  |
|---|---|---|--|--|
| VELASQUEZ, CRISTOPBAL   | Specimen: WX162282H<br>Requisition: 0001378   | Client #: 10770317 4000000<br>KENNEY, PAMELA  |  |  |
| DOB: 01/24/1978 AGE: 43 Gender: M Phone: NG Patient ID: 83734-280 | Collected: 03/15/2021<br>Received: 03/16/2021 / 14:47 EDT<br>Reported: 03/16/2021 / 23:21 EDT | USP - MCCREARY<br>Attn: RHONDA JONES<br>330 FEDERAL WAY<br>PINE KNOT, KY 42635-7000 |  |  |

#### **Infectious Diseases**

| Test Name                           | Result             | Reference Range        | Lab |
|-------------------------------------|--------------------|------------------------|-----|
| HCV RNA, QUANTITATIVE REAL TIME PCR |                    |                        | CA  |
| HCV RNA, QUANTITATIVE REAL TIME PCR | <15 NOT DETECTED   | NOT DETECTED IU/mL     |     |
| HCV RNA, QUANTITATIVE REAL TIME PCR | <1.18 NOT DETECTED | NOT DETECTED Log IU/mL |     |
| Physician Comments:                 |                    |                        |     |
|                                     |                    |                        |     |
|                                     |                    |                        |     |

#### **End Notes:**

HCV RNA, QUANTITATIVE REAL TIME PCR

CA

This test was performed using Real-Time Polymerase Chain Reaction.

Reportable Range: 15 IU/mL to 100,000,000 IU/mL (1.18 Log IU/mL to 8.00 Log IU/mL).

The analytical performance characteristics of this assay have been determined by Quest Diagnostics. The modifications have not been cleared or approved by the FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

For more information on this test, go to: http://education.questdiagnostics.com/faq/FAQ22v1 (This link is being provided for informational/ educational purposes only.)

#### **PERFORMING SITE:**

CA QUEST DIAGNOSTICS - SCHAUMBURG, 506 EAST STATE PARKWAY, SCHAUMBURG, IL 60173-4538 Laboratory Director: ANTHONY V THOMAS,MD, CLIA: 14D0416537

CLIENT SERVICES: 866.697.8378 SPECIMEN: WX162282H PAGE 1 OF 1

# Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 39 of 53 **Bureau of Prisons**

Bureau of Prisons
Health Services
Cosign/Review

Inmate Name:VELASQUEZ, CRISTOBALReg #:83734-280Date of Birth:01/24/1978Sex:MRace:WHITEEncounter Date:03/17/2021 08:48Provider:Lab Result ReceiveFacility:MCR

Cosigned by Cunnagin, Carrie DO on 03/17/2021 10:00.

# Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 40 of 53 **Bureau of Prisons**

Bureau of Prisons
Health Services
Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL
Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 03/17/2021 08:48 Provider: Lab Result Receive Facility: MCR

Reviewed by Sumner, Stephanie FNP on 03/17/2021 10:51.



### **FMC Butner**

1000 Old Highway NC 75 Butner, NC 27509 919-575-3900 x5707

\*\*\* Sensitive But Unclassified \*\*\*

Name VELASQUEZ, CRISTOBAL

**DOB** 01/24/1978 Μ

Sex

Facility USP McCreary Reg # 83734-280 Order Unit F01-109L

Provider Stephanie Sumner, NP

Collected 03/15/2021 11:26,

03/16/2021 13:21

Received 03/16/2021 12:38 Reported 03/16/2021 14:51

LIS ID 091201601

|   | HEMATOLOGY                          |                |        |
|---|-------------------------------------|----------------|--------|
| White Blood Cell Count                  | 9.0                                 | 3.6-11.0       | K/uL   |
| NRBC%                                   | 0.0                                 | 0.0-0.2        | %      |
| RBC                                     | 4.90                                | 4.30-6.20      | M/uL   |
| Hemoglobin                              | 15.5                                | 13.5-18.0      | g/dL   |
| Hematocrit                              | 46.5                                | 38.0-54.0      | %      |
| MCV                                     | 94.9                                | 80.0-96.0      | fL     |
| MCH                                     | 31.6                                | 26.0-34.0      | pg     |
| MCHC                                    | 33.3                                | 30.0-37.0      | g/dL   |
| RDW-CV                                  | 12.4                                | 10.8-15.6      | %      |
| Platelet Count                          | 294                                 | 140-440        | K/uL   |
| MPV                                     | 10.0                                | 8.3-12.8       | fL     |
| Neutrophils %                           | 50.7                                |                | %      |
| Therapeutic decision making should be b | ased on absolute values, rather tha | in percentages |        |
| Lymphocytes %                           | 38.0                                |                | %      |
| Monocytes %                             | 7.7                                 |                | %      |
| Eosinophils %                           | 2.6                                 |                | %      |
| Basophils %                             | 0.4                                 |                | %      |
| Immature Granulocytes %                 | 0.6                                 | 0.0-5.0        | %      |
| Neutrophils #                           | 4.6                                 | 1.3-7.8        | K/uL   |
| Lymphocytes #                           | 3.4                                 | 0.8-4.8        | K/uL   |
| Monocytes #                             | 0.7                                 | 0.0-0.9        | K/uL   |
| Eosinophils #                           | 0.2                                 | 0.0-0.5        | K/uL   |
| Basophils #                             | 0.0                                 | 0.0-0.3        | K/uL   |
| Immature Granulocytes #                 | 0.05                                | 0.00-0.70      | 10^3/ι |

# Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 42 of 53 **Bureau of Prisons**

### Bureau of Prisons Health Services Cosign/Review

Inmate Name:VELASQUEZ, CRISTOBALReg #:83734-280Date of Birth:01/24/1978Sex:MRace:WHITEEncounter Date:03/16/2021 14:52Provider:Lab Result ReceiveFacility:MCR

Cosigned by Cunnagin, Carrie DO on 03/16/2021 15:12.

# Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 43 of 53 Bureau of Prisons

# Bureau of Prisons Health Services Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL
Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 03/16/2021 14:52 Provider: Lab Result Receive Facility: MCR

Reviewed by Sumner, Stephanie FNP on 03/16/2021 15:30.

PATIENT INFORMATION

VELASQUEZ, CRISTOBAL

Final REPORT STATUS

Nichols Institute, Chantilly

DOB: 01/24/1978 Age: 42Y

SEX: M

ID: 83734-280

KENNEY, PAMELA

ORDERING PHYSICIAN

CLIENT INFORMATION

345

USP - MCCREARY - MCR

330 FEDERAL WAY PINE KNOT, KY 42635

SPECIMEN: CH419747P REQUISITION: 0001024

SPECIMEN INFORMATION

Test Name

LAB REF NO: 3450001024

COLLECTED: 10/26/2020 08:00 02:15 RECEIVED: 10/28/2020 REPORTED: 11/02/2020 10:41

> In Range Out of Range Reference Range

Lab AMD

HEPATITIS C, RNA, QUANTITATIVE, PCR HEPATITIS C, RNA, QUANTITATIVE, PCR

HCV RNA, PCR, QN

< 15

IU/mL

HCV RNA, PCR, QN

HCV RNA Not Detected

log IU/mL

HCV RNA Not Detected

Reference Range:

Not Detected IU/mL Not Detected Log IU/mL

This test was performed using Real-Time Polymerase Chain Reaction.

Reportable range is 15 IU/mL to 100,000,000 IU/mL (1.18 Log IU/mL to 8.00 Log IU/mL).

For additional information please refer to http://education.questdiagnostics.com/faq/FAQ22v1

(This link is being provided for informational/ educational purposes only.)

The analytical performance characteristics of this assay have been determined by Quest Diagnostics Nichols Institute, Chantilly, VA. The modifications have not been cleared or approved by the FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

#### Performing Laboratory Information:

AMD Quest Diagnostics Nichols Institute 14225 Newbrook Drive Chantilly VA 20151 Laboratory Director: Patrick W Mason, M.D.

# Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 45 of 53 **Bureau of Prisons**

### Bureau of Prisons Health Services Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL
Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 11/02/2020 15:17 Provider: Lab Result Receive Facility: MCR

Reviewed by Sumner, Stephanie FNP on 11/02/2020 15:31.

### 

Bureau of Prisons
Health Services
Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL
Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 11/02/2020 15:17 Provider: Lab Result Receive Facility: MCR

Cosigned by Cunnagin, Carrie DO on 11/03/2020 08:48.



### **FMC Butner**

1000 Old Highway NC 75 Butner, NC 27509 919-575-3900 x5707

\*\*\* Sensitive But Unclassified \*\*\*

 Name
 VELASQUEZ, CRISTOBAL
 Facility
 USP McCreary
 Collected 10/26/2020 09:44

 Reg # 83734-280
 Order Unit F01-109L
 Received 10/27/2020 11:55

 DOB 01/24/1978
 Provider Stephanie Sumner, NP
 Reported 10/27/2020 15:27

 Sex M
 LIS ID 091201600

|   |  | CHEMI       | STRY               |                         |                  |
|---|--|-------------|--------------------|-------------------------|------------------|
| Sodium  |  | 141         |                    | 136-145                 | mmol/L           |
| Potassium                                       |  | 4.1         |                    | 3.5-5.1                 | mmol/L           |
| Chloride  |  | 104         |                    | 98-107                  | mmol/L           |
| CO2   |  | 28          |                    | 21-32                   | mmol/L           |
| BUN   |  | 17          |                    | 7-26                    | mg/dL            |
| Creatinine                                      |  | 0.94        |                    | 0.60-1.30               | mg/dL            |
| eGFR (IDMS)                                     |  | >60         |                    |                         |                  |
| GFR units measured a<br>kidney disease if found | s mL/min/1.73 m^2. if Africa<br>I over a 3 month period. | n American, | multiply by 1.210. | A calculated GFR <60 su | ggests a chronic |
| Calcium   |  | 8.8         |                    | 8.4-10.2                | mg/dL            |
| Glucose   |  | 80          |                    | 70-109                  | mg/dL            |
| AST   |  | 21          |                    | 5-34                    | U/L              |
| ALT   |  | 24          |                    | 8-55                    | U/L              |
| Alkaline Phosphatase                            |  | 53          |                    | 40-140                  | U/L              |
| Bilirubin, Total                                |  | 0.5         |                    | 0.2-1.0                 | mg/dL            |
| Total Protein                                   |  | 7.4         |                    | 6.4-8.3                 | g/dL             |
| Albumin   |  | 4.2         |                    | 3.5-5.0                 | g/dL             |
| Globulin  |  | 3.2         |                    |                         | g/dL             |
| Alb/Glob Ratio                                  |  | 1.31        |                    | 1.00-2.30               |                  |
| Anion Gap                                       |  | 9.0         |                    | 9.0-19.0                |                  |
| BUN/Creat Ratio                                 |  | 17.9        |                    | 5.0-30.0                |                  |
|   |  | HEMATO      | DLOGY              |                         |                  |
| WBC   |  | 4.4         |                    | 4.0-11.0                | K/uL             |
| RBC   |  | 4.69        |                    | 4.50-6.00               | M/uL             |
| Hemoglobin                                      |  | 15.0        |                    | 13.5-18.0               | g/dL             |
| Hematocrit                                      |  | 44.1        |                    | 40.0-52.0               | %                |
| MCV   |  | 94.0        |                    | 80.0-100.0              | fL               |
| MCH   |  | 31.9        |                    | 25.4-34.6               | pg               |
| MCHC  |  | 33.9        |                    | 31.0-37.0               | g/dL             |
| RDW   |  | 13.4        |                    | 11.0-15.0               | %                |
| Platelet  |  | 280         |                    | 150-400                 | K/uL             |
| MPV   |  | 7.9         |                    | 7.0-11.0                | fL               |
| Neutrophils #                                   | L  | 1.4         |                    | 1.5-7.1                 | K/uL             |
| Lymphocytes #                                   |  | 2.5         |                    | 0.9-3.3                 | K/uL             |
| Monocytes #                                     |  | 0.3         |                    | 0.3-1.1                 | K/uL             |
| Eosinophils #                                   |  | 0.2         |                    | 0.0-0.7                 | K/uL             |
| Basophils #                                     |  | 0.0         |                    | 0.0-0.2                 | K/uL             |
| FLAG LEGEND                                     | L=Low L!=Low Critical                                    | H=High      | H!=High Critical   | A=Abnormal A! =Abn      | ormal Critical   |



### **FMC Butner**

1000 Old Highway NC 75 Butner, NC 27509 919-575-3900 x5707

\*\*\* Sensitive But Unclassified \*\*\*

 Name
 VELASQUEZ, CRISTOBAL
 Facility
 USP McCreary
 Collected 10/26/2020 09:44

 Reg # 83734-280
 Order Unit F01-109L
 Received 10/27/2020 11:55

 DOB 01/24/1978
 Provider Stephanie Sumner, NP
 Reported 10/27/2020 15:27

 Sex M
 LIS ID 091201600

|   | HEMATOLOGY  |   |  |  |  |
|---|---|---|--|--|--|
| Neutrophils %   | 32.5  | % |  |  |  |
| Therapeutic decision making shoul<br>Unable To Perform Manual Diff Du | ld be based on absolute values, rather than percentages e To Age Of Specimen. |   |  |  |  |
| Lymphocytes %   | 55.3  | % |  |  |  |
| Monocytes %   | 7.2   | % |  |  |  |
| Eosinophils %   | 4.0   | % |  |  |  |
| Basophils %   | 1.0   | % |  |  |  |

# Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 49 of 53 **Bureau of Prisons**

Bureau of Prisons Health Services Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL
Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 10/27/2020 15:27 Provider: Lab Result Receive Facility: MCR

Reviewed by Sumner, Stephanie FNP on 10/28/2020 12:31.

# Case 2:11-cr-01781-AM Document 1426-1 Filed 11/14/22 Page 50 of 53 **Bureau of Prisons**

Bureau of Prisons
Health Services
Cosign/Review

Inmate Name: VELASQUEZ, CRISTOBAL

Date of Birth: 01/24/1978 Sex: M Race: WHITE
Encounter Date: 10/27/2020 15:27 Provider: Lab Result Receive Facility: MCR

Cosigned by Gomez, Kenneth MD on 10/29/2020 10:07.

| Reg. Number: 83734-280 | Inmate name: VELASQUEZ, CRISTOBAL |          | Temperature | Headache | Diarrhea | Nausea or Vomiting | Stuffy/Runny Nose | New Loss of Taste/Smell | Sore Throat | Muscle or Body<br>Aches | Fatigue | Trouble Speaking/<br>Breathing | New-Onset Cough/#<br>Days | (Symptoms) | F01-109L |
|------------------------|-----------------------------------|----------|-------------|----------|----------|--------------------|-------------------|-------------------------|-------------|-------------------------|---------|--------------------------------|---------------------------|------------|----------|
|                        |                                   | /4       |             | )        |          |                    |                   |                         |             |                         |         |                                | #                         | Ø          | Wed      |
|                        |                                   | 1        | <b>*</b>    | 7        |          |                    |                   |                         |             |                         |         |                                |                           | B          | Wed Thur |
|                        |                                   | <b>(</b> |             |          |          |                    |                   |                         |             |                         |         |                                | _                         | S)         | <i>F</i> |
|                        |                                   | (        |             | )        |          |                    |                   |                         |             |                         |         |                                | -                         | 2/         | Sat      |
|                        |                                   |          | 0           |          |          |                    |                   |                         |             |                         |         |                                | 2                         | X          | Sun      |
|                        |                                   | 1        | 2           | )        |          |                    |                   |                         |             |                         |         |                                | -                         | 6          | Mon      |
|                        |                                   | 1        |             | D        |          |                    |                   |                         |             |                         |         |                                |                           | 7          |          |
|                        |                                   | đ        | E C         |          |          |                    |                   |                         |             |                         |         |                                | (                         |            | Wed      |
|                        |                                   |          | (/()        | 2        |          |                    |                   |                         |             |                         |         |                                | (                         | 2          | 1        |
|                        | (                                 |          |             |          |          |                    |                   |                         |             |                         |         |                                |                           |            | FI       |
|                        |                                   | 4        |             |          |          |                    |                   |                         |             | :                       |         |                                |                           | 6          | Sat      |
|                        |                                   |          | Ð           |          |          |                    |                   |                         |             |                         |         |                                | (                         |            | Sun      |
|                        |                                   | 4        |             | •        |          |                    |                   |                         |             |                         |         |                                |                           | (A)        | Mon      |
|                        | :                                 |          | 0           |          |          |                    |                   |                         |             |                         |         |                                | (                         | Z          | Tue      |
|                        |                                   |          | 6           | 1        |          |                    |                   |                         |             |                         |         |                                |                           | B          | Wed      |

8/4/2021-8/18/2021

BP-A1136 FEB 21

#### **COVID-19 VACCINE CONSENT - INMATE**

|          |             | 4 25       |  |
|----------|-------------|------------|--|
|          | DEDARTMENT  | OF HIOTIAE |  |
| 115      | DEPARTMENT  | DE JUSTICE |  |
| <b>,</b> | DEI WILLIAM | 0. 0001102 |  |

**FEDERAL BUREAU OF PRISONS** 

|  |                                | en provided a copy of the C  |                            |                 |            |                             |  |  |
|--|--------------------------------|--|----------------------------|-----------------|------------|-----------------------------|--|--|
|  |                                | ed <u>12/11/2020</u> . I ha  |                            |                 |            |                             |  |  |
| nd risks of vaccination, including if I am pregnant, breastfeeding or have a weakened immune ystem. I will agree to complete the number of vaccine doses as appropriate and indicated by the |                                |  |                            |                 |            |                             |  |  |
|  |                                |  | number of vaccine d        | loses as app    | ropriate   | and indicated by the        |  |  |
|  | ıfactı                         |  |                            |                 |            |                             |  |  |
|  |                                | stions Prior to COVID-19 Vacc                                      | ination (Check yes or      | no)             |            |                             |  |  |
| Yes  | No                             | Health Questions   |                            |                 |            |                             |  |  |
|  | Х                              | Are you sick today?  | •                          |                 |            |                             |  |  |
|  | Х                              | Have you ever had a severe allo<br>any component of this vaccine o |                            |                 | e allergic | reaction of any severity to |  |  |
|  | Х                              | Have you ever had an immediat                                      | te allergic reaction to an | y other vaccin  | e/injectab | le therapy?                 |  |  |
|  | Х                              | Have you had any other vaccina                                     | ations in the last 14 days | s?              |            |                             |  |  |
|  | Х                              | Have you received monoclonal                                       | antibody therapy for CC    | OVID-19 in the  | ast 90 da  | iys?                        |  |  |
| (100   | onse                           | nt to receive the COVID-1  | 9 vaccination.             |                 |            |                             |  |  |
| 1 -  | se #<br>or 2)                  | Vaccine Manufacturer   | Lot Number                 | Expiration Date | Route      | Deltoid                     |  |  |
|  | 2                              | Pfizer   | EW0158                     | 7/31/21         | IM         | Left<br>□ Right             |  |  |
| Inn  | ate S                          | ignature   |                            |                 |            | Date                        |  |  |
|  | 100                            | MUND   |                            |                 |            | 4/5/2021                    |  |  |
| Adr  | Administered by Signature Date |  |                            |                 |            |                             |  |  |
| _  | a. Mar RN 4/5/2021             |  |                            |                 |            |                             |  |  |
| Adı  | ninis                          | tered by (name/title)  |                            |                 |            | <u> </u>                    |  |  |
|  | A. N                           | IORROW, RN   |                            |                 |            |                             |  |  |
|  |                                | -  | _                          |                 |            |                             |  |  |

| Inmate Signature     | Date |
|----------------------|------|
|                      |      |
| Witness Signature    | Date |
|                      |      |
| (PRINT) Witness Name |      |
|                      | . `  |

| (PRINT) Inmate Name (Last, First) | Register Number |                 |    |
|-----------------------------------|-----------------|-----------------|----|
| VELASQUEZ, CRISTOBAL              | 83734-280       |                 | ,  |
| Institution                       | Unit            | Work Assignment |    |
| MCR                               | F01-109L        |                 | *) |

DOCUMENT VACCINE ADMINISTRATION IN BEMR FLOW SHEETS SCAN VACCINE CONSENT IN BEMR DOCUMENT MANAGER – VACCINATION CONSENT

**Priority Patient** 



BP-A0807

#### **INFLUENZA VACCINE CONSENT - INMATES**

Sep 11

#### U.S. DEPARTMENT OF JUSTICE

#### **FEDERAL BUREAU OF PRISONS**

{\*Note: CDC Vaccine Information Statements in multiple languages available at: www.cdc.gov/vaccines/pubs/vis/}

I have been provided a copy of the Vaccine Information Statement\* for Influenza Vaccine dated <u>8/7/15</u>. I have had the opportunity to ask questions about the benefits and risks of vaccination.

### Consent to receive the influenza vaccine at this time.

### Health Questions Prior to Influenza Vaccination (Check Yes or No)

| Yes | No | Health Questions  |
|-----|----|---|
|     | Х  | Are you sick today? (if moderately to severely ill should postpone vaccination) |
|     | Х  | Do you have allergy to eggs?  |
|     | Х  | Have you ever had serious reaction to influenza vaccine?                        |
|     |    | If so, describe:  |
|     | X  | Have you had Guillain-Barré syndrome (progressive paralysis)                    |

| A. Lawson RN G. Cathers RN N. Stephens RN K. Miracle RN J. Free RN H. Privett RN | Inmate Signature | Witness Signature                                    | Date     |
|--|------------------|--|----------|
|  | Cause Villey     | N. Stephens RN K. Miracle RN J. Free RN A. Morrow RN | 10/16/20 |

### ☐ I decline to receive the influenza vaccine at this time.

| Inmate Signature | Witness Signature                                    |  | Date |  |
|------------------|--|--|------|--|
|                  | A. Lawson RN N. Stephens RN J. Free RN H. Privett RN | G. Cathers RN<br>K. Miracle RN<br>A. Morrow RN |      |  |

| (PRINT) Inmate Name | (Last, First) | Register  | Quarter  | Facility |
|---------------------|---------------|-----------|----------|----------|
| VELASQUEZ           | CRISTOBAL     | 83734-280 | F01-109L | MCR      |